

BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	287	10/15
TYPIST	357	10/15/93
VERIFIER	20	10/15/93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final Original	
1	3/3/00
2	3/1/01
3	01/02
4	02/02
5	04/02
6	01/23
7	12/22
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Claim		Date					
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SYMBOLS

✓	Rejected
■	Allowed
-	(Through numeral)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

(LEFT INSIDE)